EMPOWER KING'S GATE CHRISTIAN SCHOOL

Sponsorship Agreement

2026-2027

SPONSOR INFORMATION

COMPANY OR FAMILY NAME _____
*as you would like printed

PRIMARY CONTACT NAME _____

COMPANY/FAMILY MAILING ADDRESS _____

CITY/STATE/ZIP CODE _____

EMAIL _____

PHONE _____

I WOULD LIKE TO PARTNER AS SELECTED BELOW:

EVENT SPONSORSHIP

AMAZING gRACE	TITLE	GOLD	SILVER	BRONZE	
LAUGHTER WITH THE LIONS	HEADLINER	OVATION	ENCORE	OPENING	TABLE
ATHLETICS BANQUET	LEGACY	CHAMPION	ELITE	PREMIER	TABLE

PROGRAM SPONSORSHIP

ATHLETICS PROGRAM SUPPORT	AD'S CIRCLE	COACH'S CREW	VARSITY	JV
FINE ARTS PROGRAM SUPPORT	MASTERPIECE	VISIONARY	CURATOR	ARTESIAN

PAYMENT INFORMATION

TO SUBMIT PAYMENT, PLEASE INCLUDE A CHECK OR COMPLETE THE CREDIT CARD INFORMATION BELOW. PLEASE MAKE CHECK PAYABLE TO KING'S GATE CHRISTIAN SCHOOL. PAYMENT MAY ALSO BE SUBMITTED ONLINE AT WWW.KINGSGATESCHOOL.COM/SPONSORSHIPS.

NAME ON CARD _____

CREDIT CARD NUMBER _____

EXPIRATION _____ CVV _____ BILLING ZIP CODE _____

SPONSORSHIP TOTAL $_____

SIGNATURE _____ DATE _____

SPONSORSHIP SPECIFICATIONS

PLEASE SUBMIT ALL FILES TO ASTEEDMAN@KINGSGATESCHOOL.COM.

LOGO Preferred File Types: JPEG, EPS, PNG

PROGRAM ¼ Page: 3.75" x 4.75" ½ Page: 7.5" x 4.75" Full Page: 7.5" x 10"